## PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998

Application or Docket Number

09/467,50/

CLAIMS AS FILE (Column							SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
F	OR	NUMB	BER FILED NUMBER EXTR		EXTRA	ſ	RATE	FEE	1	RATE	FEE
BA	ASIC FEE						0	380.00	OR		760.00
TC	OTAL CLAIMS	47	minus	20= * 27	-		X\$ 9=	/	OR	X\$18=	486
INE	DEPENDENT CLA	IMS S	minus	3= * 2-		1	X39=		OR	X78=	187
ML	JLŢIPLE DEPENDI	ENT CLAIM P	RESENT				+130=		1	+260=_	λ <b>φ</b> .
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	4 7 7	1/02
CLAIMS AS AMENDED - PART II								- CHARLES	OR,	TOTAL.	1,402
		AIMS AS A (Column 1)	(Column 2)	(Column 3)		SMALL	ENTITY	OR	OTHER		
_		CLAIMS	,	HIGHEST	(Column 3)			ADDI-3		Service Service	LADDI-
ENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL		RATE .	TIONAL
MENDMENT	Total *	.37	Minus	47	=		X\$ 9=	32	OR	X\$18≣1	
ZE	Independent *	. 5	Minus	*** 5	=		X39=			. ×78≡÷	1.4
۷	FIRST PRESENT	ATION OF MU	JLTIPLE DEF	ENDENT CLAIM		7 1	42.3		OH C		2.22 A 2.17
					1		+130=,	-M41%	OR:	:-260∌	
-	- -					AD	TOTAL	1.	OR.	ADDIT/FEE	
		(Column 1)		(Column 2)	(Column 3)	7	3.00				
ENT B	0-	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	1		ADDI		SHICE!	ADDI?
		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		RATE	TIONÁL *FEE /	//	RATE	TIONAL
AMENDMENT	Total *	43	Minus	: U7	= 2		X\$ 9=	1411/2	OR	X\$18=	****
	Independent *	(0	Minus	***・* う <sup>*</sup>	=, -/	, i.e.	X39=	Constitution of the	oliver a	- 88	OII.
<b>⋖</b> .	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>~3−</b>	A Company of the Comp	OR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	83
	•,					Ŀ	130=	12.	OR	/+260= <sup>1</sup>	なが
			•		\$ 's	ADI	TOTAL DIT. FEE		ÓŖ	TOTAL ADDIT. FEE	84
		(Column 1)		(Column 2)	(Column 3)					1	it, it is but
AMENDMENT C		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	Г		ADDI-		- J	ADDI
	A	AFTER VMENDMENT		PREVIOUSLY PAID FOR	EXTRA	F		TIONAL FEE		BATE	TIONAL
	Total *	•	Minus	** .	=	13	<b>(\$ 9=</b>	****	OR	/X\$18=	Plate of the
	Independent *		Minus	***	= ' '	.	X39= <sup>/</sup>		<i>'</i>		4
٧	FIRST PRESENT	ATION OF MU	JLTIPLE DEP	ENDENT CLAIM		H	~>5=		OR	.X78=/	
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+260=	1
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
•	The "Liebest Number	er Freviously Pa	us for IN IMIS	OFAUE IS IESS TA	n 3, enter 3.						2. 1